



**Congressman Markwayne Mullin
Second District of Oklahoma
Academy Nomination Application**

Cover Check Sheet

- _____ Completed Application
- _____ 2 Letters of Recommendations
- _____ 1 Service Academy Academic Recommendation Form
- _____ 1 Page personal statement outlining why you are interested in entering a service academy.
- _____ A recent photo of yourself.
- _____ 1 official copy of your high school transcript.
- _____ 1 official copy of your ACT or SAT scores, with the writing component.

All applications must be returned by the **November 6, 2014** deadline. All applicants meeting eligibility requirements will be notified of the date, time, and place to report for a personal interview by a review panel.

The review panel will consist of three to five individuals, who are business and community leaders, service academy graduates, active military personnel and academia. Selections are made competitively on the basis of academic performances, leadership potential, personal statement, extra-curricular activities, personal interviews and letters of recommendations. The nominees for each vacancy will be recommended to Congressman Mullin by the review panel. Congressman Mullin will review and submit these recommendations to each service academy. The final ranking and subsequent appointments will be at the discretion of the academies.

United States Service Academy Nominations 2014 Schedule

- | | |
|-----------------------------------|--|
| Thursday, November 6, 2014 | Deadline for submission of application |
| Tuesday, December 9, 2014 | Personal Interview. |
| Monday, December 15, 2014 | Nominee notification of status by mail begins. |

Applicant Name: _____

Academy: _____

Mail to: United States Congressman Markwayne Mullin
Attention: Mary Bower
431 West Broadway Muskogee, OK 74401
Phone: (918) 341-9336 Fax: (918) 686-0128



**Congressman Markwayne Mullin
Second District of Oklahoma
Academy Nomination Application**

Full Legal Name:

Social Security No.:

(Check those in which you currently have or will have an open file. If you are interested in more than one academy, please rank them in order of importance.)

☐

Air Force

☐

Marine

☐

Naval

☐

Military

Personal Information:

Date of Birth:

Place of Birth:

Are you a U.S. Citizen?

Mailing Address:

Street Address:

City:

State:

Zip Code:

Legal Address in Oklahoma:

(Check mark if it is the same address as above)

☐

Street Address:

City:

State:

Zip Code:

Contact Information:

Home Phone:

Cell:

Email :

Guardian Name:

Daytime Phone:

Guardian Name:

Daytime Phone:

Academic Data:

High School:

Graduation Date:

Counselor:

School Phone No.:

Does your classes include:

Honors

☐

AP
Classes

☐

Other

(i.e. College
classes)

GPA: _____

Class
rank: _____

Application for Nomination to the United States Service Academies

Extra Curricular Activities and Awards

Below, list your school and community activities. Complete form or attach your own typed information.

| Activity | Description of activity, accomplishments, offices held, awards, etc. | Year(s) |
|-----------------|---|----------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Check here if you are attaching documents to support the above section. _____

I have read and fully understand the requirements and procedures for obtaining a nomination to the service academies by Congressman Boren, and do hereby apply for a nomination. I also understand the Academy Review Panel reserves the right to reject any application which contains inaccurate information.

Signature: _____

Have you applied with any other Congressional or Senate offices?

Yes ____ No ____ If yes with whom? _____



**Congressman Markwayne Mullin
Second District of Oklahoma
Service Academy Recommendation Form**

Please Type or Print the required information.

School Counselor or Teacher

Note: This recommendation form is completely confidential. After filling out the form, place in an envelope and seal.

Name of Applicant: _____ Your Name: _____

Year in school: _____ Business Phone: _____

| Please rate applicant's abilities: | Excellent | Good | Fair | Poor |
|---|-----------|------|------|------|
| Leadership Characteristics | | | | |
| Personality Traits | | | | |
| Ability to get along with and work well with others | | | | |
| Ability to work under pressure | | | | |
| Ability to take criticism | | | | |
| Attendance, punctuality and dependability | | | | |
| Overall assessment of candidate | | | | |

Additional Academic Criteria
(mark all that apply):

Honors _____ AP Classes _____ Other _____

Comments: _____

Signature: _____ Date: _____

Title: _____ School: _____